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Annual Report

OF THE

Nova Scotia

Alcoholism Research Foundation

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THE HONOURABLE D. SCOTT MacNUTT,

Minister of Public Health

Sir:

I beg to offer herewith the Report of the Alcoholism Research Foundation for the year 1970.

Respectfully submitted,

CHARLES M. HARLOW,

Chairman.

NOVA SCOTIA ALCOHOLISM RESEARCH FOUNDATION

1970

MEMBERS:

Charles M. Harlow, C.D., B.Sc., Ph.D., M.D., C.M., D.Sc.,
Halifax ..... Chairman

M. Grace Wambolt, B.A., LL.B., Q.C.,
Halifax ..... Vice-Chairman

Leo C. Hogan, Lt.-Colonel,
Halifax

Angus Norman MacDonald, B.A.,
Glace Bay

Raymond H. MacFarlane, B.A., B.D., S.T.M., (Jan.-Nov.)
Bedford

Clyde S. Marshall, M.D., C.M., D.C.L.,
Halifax

Hector J. Pothier, M.D., C.M.,
Yarmouth

Harold L. Scammell, M.D., C.M.,
Halifax

Edison B. Skinner, M.D., C.M.,
New Glasgow

MEDICAL ADVISORY COMMITTEE

Robert C. Dickson, O.B.E., M.D., F.R.C.P., F.A.C.P.,
Halifax

F. Murray Fraser, M.D., C.M.,
Halifax

Robert O. Jones, B.Sc., M.D., C.M., F.A.P.A.,
Halifax

STAFF MEMBERS

HALIFAX OFFICE:

J. Murray Snow, M.Sc., M.D., C.M. ..... Executive Director

Margaret M. Caswell, (Mrs.), R.S.W. ..... Social Worker

Edward T. Fitzpatrick, B.A. ..... Field Representative

Madeline E. O'Sullivan, (Mrs.) ..... Welfare Officer

Rosalind A. Dunton, (Mrs.) ..... Secretary
(Aug.-Dec.)

Helen L. Casey ..... Stenographer
(Jan.-June)

Patricia A. Degg, (Mrs.) ..... Clerk-Typist
(May-Dec.)

Brenda L. Burt ..... Clerical Assistant (Casual)
(May-Aug.)

Shirley J. Urquhart, (Mrs.), R.N. ..... Nurse (Casual)
(Jan.-Apr.)

Nancy G. Russell, (Mrs.), R.N., P.H.N. ..... Nurse (Casual)
(May-Dec.)

Harold L. Scammell, M.D., C.M. ..... Consultant in Alcoholism

SYDNEY OFFICE

Earl D. Ward, B.A., B.D., S.T.M ..... Supervisor
(May-Dec.)

Gail E. MacDougall ..... Stenographer
(May-Dec.)

Myrtle M. Burchell, (Mrs.) ..... Welfare Officer casual)
(May-Dec.)

Martin M. Merner ..... Field Representative
(Sept.-Dec.)

STANDING COMMITTEES

Policy and Personnel Committee:

Dr. H. L. Scammell, Chairman
Mr. L. C. Hogan
Dr. C. S. Marshall
Dr. H. J. Pothier
Dr. C. M. Harlow, ex officio
Dr. J. M. Snow, ex officio

Field Program Committee:

Miss M. Grace Wambolt, Chairman
Mr. A. N. MacDonald
Rev. R. H. MacFarlane
Dr. E. B. Skinner
Dr. C. M. Harlow, ex officio
Dr. J. M. Snow, ex officio

Long-Range Planning Committee: (Jan. to Oct.)

Rev. R. H. MacFarlane, Chairman
Mr. A. N. MacDonald
Dr. C. S. Marshall
Dr. H. L. Scammell
Dr. C. M. Harlow, ex officio
Dr. J. M. Snow, ex officio

Planning and Arrangements Committee: (Oct. to Dec.)

Dr. H. L. Scammell, Chairman
Mr. L. C. Hogan
Mr. A. N. MacDonald
Dr. C. S. Marshall
Dr. E. B. Skinner
Miss M. Grace Wambolt
Dr. C. M. Harlow, ex officio
Dr. J. M. Snow, ex officio

Legislation Committee:

Miss M. Grace Wambolt, Chairman
Dr. C. S. Marshall
Dr. H. L. Scammell
Dr. C. M. Harlow, ex officio
Dr. J. M. Snow, ex officio

ANNUAL REPORT 1970

During the calendar year 1970, the Nova Scotia Alcoholism Research Foundation functioned under the direction of the nine members appointed by Governor-in-Council in December 1969, with Dr. C. M. Harlow being designated as Chairman and Miss M. Grace Wambolt as Vice-Chairman. The Foundation Members held regular quarterly meetings with an annual meeting held during the month of October as required in the Foundation By-Laws.

Special Committees appointed by the Foundation also meet as required for appropriate maintenance and development of various aspects of the Foundation program. These are considered standing committees for the year and are concerned with Policy and Personnel, the Field Program, Legislation and Long-Range Planning. At the Annual Meeting in October, 1970, the Long-Range Planning Committee was reconstituted as the Planning and Arrangements Committee to deal with specific matters of the present program with respect to alcoholism, inclusion or otherwise of drugs in the program, the need of enlarged quarters and increased staff and all matters pertaining thereto. Each Committee is composed of nominated members of the Foundation, supplemented by the Foundation Chairman and the Executive Director who serve as ex officio members of all Committees.

The Medical Advisory Committee composed of three members of the medical profession was re-appointed by Governor-in-Council for an additional one year term.

During the year 1970, the Foundation program was continued along the previously established lines in the designated fields of Research, Education, Treatment and Rehabilitation, with maintenance of the staff establishment in Halifax and the new establishment of facilities in Sydney.

RESEARCH

A limited extra-mural research program has been continued, through financial assistance by means of grants in aid for appropriately approved research projects in Nova Scotia Universities. Approval of these research projects has been based on recommendation of the Medical Advisory Committee augmented by members of the Foundation, who have experience in the field of medicine or research.

During 1970, no new suitable research projects were submitted. However, some previously initiated projects were continued.

The final report of a research project completed by Mr. David V. Warren, Department of Psychology, St. Francis Xavier University, Antigonish, was received. This project was entitled "An Investigation Into The Relevant Variables Connected With The Degree Of Alcoholism In An Indian Community In Nova Scotia".

A research project initiated in the previous year by Dr. Marcia Earhard, Department of Psychology, Dalhousie University, dealing with "Emotional Correlates Of Alcohol Addiction", was supported for continuation.

A continuing project on "Histochemical Studies in Liver Cirrhosis" under the direction of Dr. Robert C. Dickson, Professor of Medicine at Dalhousie University and head of the Department of Medicine at the Victoria General Hospital, was approved for further support.

Applications will be invited for extra-mural research projects to be conducted during 1971-72 fiscal year, if they are considered promising.

EDUCATION

Educational efforts carried out by the Foundation during the year include the Field Program of Community Organization, Industrial Programming, Public Relations, Professional Education, Summer School Scholarship Awards and Staff Education.

Community Committees On Alcoholism

There were no new Committees on Alcoholism organized in Nova Scotia last year. The Field Representative tried to strengthen and keep active the ten groups that are now functioning in the Province. These groups are located in Bridgewater, Yarmouth, Digby, Middleton, Kentville-Wolfville, Truro, New Glasgow, Antigonish, Glace Bay and Sydney. Perhaps at this point, it would be opportune to review some of the concepts, goals and objectives of these volunteer community groups on alcoholism.

Concepts Of A Community Group

(1) Alcoholism is a disease and the alcoholic is a sick person.

(2) Alcoholics can be helped and are worth helping.

(3) Alcoholism is a public health problem and therefore, a public responsibility.

Goals and Objectives

(1) Carry on a continuing campaign of education and information on alcoholism, using all accepted media.

(2) Obtain beds in general hospitals for the treatment of alcoholics in the acute phase of the illness.

Another major purpose of our Community Groups has been to involve people. As more and more have become involved, they have not only become imbued with the knowledge and understanding of alcoholism, they have also become effective as health educators in their own right and have brought their knowledge and understanding to many others. This then is the point in time that most of the areas find themselves in, and hopefully will now come permanent Foundation personnel to work full-time on this very complex problem in the communities of Nova Scotia. Over the past several months, many of the groups have done extensive studies on the needs for their own areas. At first, they were looking at the possibility of setting up specialized facilities for the treatment of the alcoholic in their locality. However, when the matter was further examined, it was found that specialized facilities were not required.

The majority of the groups now feel that with proper co-ordination and utilization of existing facilities, the problem can be dealt with. Now the groups are directing their energies towards the acquiring of personnel that would act as Counsellor-Coordinators and would, hopefully, tie in all the community facilities such as General or Regional Hospitals, Departments of Welfare and Manpower, Mental Health Centers and any other agency in the Community that could aid in the treatment and rehabilitation of those who suffer from this very complex illness.

With this in mind, other groups are trying to get a clear-cut policy worked out with the Hospital Insurance Commission to see that alcoholism will be treated as an insured service and that hospitalization will be looked upon as medically necessary.

Still other Committees have been active in ecouraging the establishment of Al-Anon Groups in their areas. The film "Time For Decision" from the Foundation's Film Library, has been an excellent audio-visual aid. Literature from the Foundation has also been used for this purpose.

A continuing spirit of co-operation and good will with the membership of the fellowship of Alcoholics Anonymous, exists in all areas where the Community Committees on Alcoholism exist. Without their continued moral support and helpful relationships, our results in many areas would be greatly less than they are.

A major project that has been undertaken in Antigonish, by that Local Group, has been the efforts to try to have a recovery house for alcoholics established at the Augustine Monastery at Tracadie. Many, many meetings have been held over the past months and the Group has been legally incorporated. The proposed area to be served will be Antigonish, Guysborough, Inverness and Richmond Counties. Possibly at a later date, the County of Pictou will also be included. The Augustine Fathers will not be giving up their present work, but will facilitate the operation of the project by the sponsoring group, which will definitely be in charge.

The purpose of the Recovery House will be to rehabilitate alcoholics by the provision of an opportunity to withdraw from their present environment to an atmosphere of quiet, wholesome occupation in the farm-like setting of the Monastery. The House will be for the employable alcoholic. The many services which are available in the Town of Antigonish will be utilized to the full extent in looking after the social, psychological and physical needs of the occupants.

One of the direct results of the Canadian Foundation on Alcohol and Drug Dependencies Conference in Halifax in June of this year, was in making the many delegates from Nova Scotia realize that the Alcoholism Foundation of Nova Scotia must become involved, not just

in the drug alcohol, but in all drug dependencies. At least 80% of the Community Committees have sent written requests to the Minister of Public Health and the Chairman of the Foundation to have the Foundation's Terms of Reference and title changed to the Nova Scotia Research Foundation on Alcoholism and Drug Dependencies. By doing this, the Groups feel that there then would be one official Government Agency that will study the many medical, social and psychological implications of these drugs. This would establish an official clearing house to distribute educational information on drugs.

The members of the Committees feel that although, at present, there is no cause for alarm in Nova Scotia on the excessive use of drugs, that there are definite areas where concern is justified.

Industry

Continued contact has been maintained with several large Federal Government Departments in the Halifax Metropolitan area. Through these contacts, many patient referrals are made to the Out-Patient Clinic at Halifax.

Public Relations

This aspect of the Foundation's Educational Program has required the active participation of various staff members in responding to requests for qualified speakers, panelists or discussion leaders in varied settings.

The Field Representative has, over the past year, addressed many organizations throughout Nova Scotia. These included talks to Service Clubs, High Schools, A. A. Groups, Department of Manpower upgrading classes and Community Groups. The continued interest shown by such Groups indicates a greater desire for information regarding the problem of Alcoholism on the part of the general public and in particular, the young members of society. The interest concerning alcoholism that is shown in the extremely active group discussions that invariably follow a staff presentation makes it quite evident that the public is becoming increasingly aware of the problem.

Invitations to participate in presentations by means of mass media are accepted whenever possible and during the past year the Field Representative has given several radio interviews. The Executive Director has also had television interviews in the Halifax area particularly during the time of the Annual Canadian Conference on Alcoholism.

Some work in school settings was done by the Executive Director and the Welfare Officer in the Halifax area. In addition, the Social Worker and Welfare Officer have both contributed to the Halifax-Dartmouth Help Line, which is a 24-hour a day telephone counselling service for people in troubled circumstances.

Continued maintenance of a mutually advantageous relationship has been maintained with fellowships of Alcoholics Anonymous and the Al-Anon Family Groups.

As an aid to public education endeavours, film showings are frequently provided with a staff representative present to lead subsequent discussion.

Professional Education

The Foundation has continued to receive many requests for lectures and clinical demonstrations from groups which are directly concerned with the problem of alcoholism and whose fields of endeavour bring them in close contact with the alcoholic individual. These requests, in the field of professional education are met by the Executive Director, if possible, or a designated member of the professional staff.

A high level of interest has been noted in the field of social welfare, among both workers and students. Several groups of social workers have obtained orientation toward the problem of alcoholism through this Clinic and discussions with staff members. The Executive Director lectured to the students at the Maritime School of Social Work and the social worker, Mrs. Caswell, presented a lecture and discussion for the Welfare Officers Class at the Halifax County Vocational School.

Members of the nursing profession have constituted another group, with a high level of interest in this major social and health problem. The Executive Director has given lectures at the School of Nursing of the Victoria General Hospital and senior students from that institution have also attended teaching clinics held in the Halifax Out-Patient Centre. Similar teaching clinics were also held for students from the Dalhousie School of Nursing, Public Health Nurses, and Members of the nursing staff of the Department of National Health and Welfare, Medical Services Branch.

An increasing number of medical students from the first three years of their professional course at Dalhousie University have had an opportunity to obtain some clinical training in alcoholism at the request of the Department of Preventive Medicine. A conference was also held with Residents in Psychiatry at the Victoria General Hospital in order to maintain an efficient treatment program for individuals seeking help, both at the Out-patient Department of the hospital and the Alcoholism Clinic.

In cooperation with the Institute of Pastoral Training, students in Theology at the University of Kings College and Pine Hill Divinity College have received some orientation on the subject of alcoholism. Other professional educational endeavours have been directed toward students in physical education at Dalhousie University, Dietitians at the Halifax Infirmary and Home Economics students at Mount St. Vincent University.

The staff of the Alcoholism Research Foundation consider professional education a vital facet of the program and will continue to provide services in this regard whenever it is requested by interested groups.

Summer School Scholarships

An increased response was noted in 1970 regarding the policy of the Foundation in providing scholarships for alcohol studies. These scholarships to a value of $550 each enabled successful candidates to attend the Summer School of Alcohol Studies at Rutgers University in New Brunswick, New Jersey.

Ten scholarships were awarded for this purpose this year and the number of qualified applicants exceeded the number of scholarships available. The recipients, this year, included the following: Rev. J. A. Alexander, Baptist Clergyman, Milton, N. S.; Mrs. Myrtle Burchell, Alcoholism Counsellor, Sydney, N. S.; Mrs. Nellie Crowe, Health Education Instructor, Truro, N. S.; Fr. M. W. Currie, Catholic Clergyman, Halifax, N. S.; Mrs. Elizebeth DeBay, Nurse, Dartmouth, N. S.; Rev. D. E. Ferguson, Anglican Clergyman, Shelburne, N. S.; Mr. R. Ferguson, Welfare Officer, Antigonish, N. S.; Mr. J. D. Gillis, Social Worker, Dartmouth, N. S.; Mr. Lowell Mullins, Welfare Officer, Sydney, N. S.; Mrs. Mary Piercey, Psychology Student, Sydney, N. S.

Continuation of the scholarship program is anticipated in order to further increase the number of knowledgeable individuals who in turn are in a position not only to help to create an awareness of the problem of alcoholism at the community level, but also to assist constructively in dealing with it. The Foundation's policy of offering Summer School Scholarships has received very favourable comment from recognized leaders in the field of Alcohol Education and should justify increasing support in the years ahead.

Staff Education

The Foundation endeavours to have as many staff members as possible attend conferences and courses to further their knowledge and training in alcoholism and related fields.

Members of the professional staff of the Foundation attended the Canadian Conference on Alcoholism held in Halifax in June, 1970. The Social Worker, Mrs. Caswell, attended a Welfare Conference in Halifax and the Welfare Officer, Mrs. O'Sullivan, and the Executive Director, Dr. Snow, attended the Annual Conference of the Atlantic Provinces Correction Association, held in Truro.

The Executive Director again attended the Dalhousie Medical Refresher Course which serves a dual purpose of continuing education as well as maintaining liaison with other members of the medical societies.

Treatment and Rehabilitation

The Nova Scotia Alsoholism Research Foundation now operates two treatment centers in the Province. The Out-Patient Clinics in Halifax is now in existence for seven years and during this period, there has been a continuing annual increase in the number of afflicted individuals seeking treatment. In May of 1970, the Foundation opened a new treatment center, located in the City of Sydney and this center has been called upon to serve the needs of an appreciable number of people during its relatively short period of operation.

The Halifax Out-Patient Clinic now has a total of 1,267 persons registered. In addition to treatment of persons suffering from the disease of Alcoholism, many family members of either registered patients or other individuals who have not yet sought help, avail themselves of the counselling services of the Clinic. During the year 264 new patients have registered for treatment. This number, along with previously registered patients returning for treatment and management, make up a total of 478 individuals utilizing the treatment services. These registration statistics are shown in Table I, with the figures for the previous year included for purpose of comparison.

TABLE I

	1969	1970
Total Cases on File	1,003	1,267
New Patients Registered during Year	236	264
Total Patients Treated during Year	457	478

The sources of referral are shown in Table II. As the clinical program has become better established, there is a further widening of the base of sources of referral, indicating a greater awareness of alcoholism and the need for early recognition by professional persons and the general public, alike.

TABLE II

Sources of Referral

Self	67
Court and Probation Services	62
Social Agencies	34
Clinic Patients	18
Family and Friends	17
Alcoholics Anonymous	17
Physicians	17
General Hospitals	14
Clergy	9
Employers	6
Nova Scotia Hospital	3
Total	264

The treatment approach utilized at the Halifax Alcoholism Clinic includes medical examination, laboratory investigation, medical management, social assessment, psychiatric consultation, if necessary, individual counselling and group sessions. The individual counselling and medical management combine to form the basis approach to therapy in the majority of cases, with medical management being usually more significant during the early phase of treatment but replaced by the psycho-therapeutic support of counselling as time progresses. Each individual case must be treated on its own merits with a flexible approach tailor-made to best serve the needs of the individual alcoholics.

The Halifax Clinic staff conducted a total of 4,337 personal interviews or individual treatment sessions during the year. The breakdown of this number is given in Table III along with figures for 1969 for comparison. The present counselling staff, composed of a social worker, Mrs. Margaret Caswell, and a Welfare Officer, Mrs. Madeline O'Sullivan, has been able to cope with the case load, with medical services provided by the Executive Director who has continued in the capacity of Clinic Physician along with primary duties in the field of administration and professional education. A part-time, Registered Nurse, has been assisting with medical management of patients throughout the year.

TABLE III

Clinic Interviews

	1969	1970
Patients	4,185	3,911
Patients' Families	405	302
Miscellanous	74	124
Total	4,664	4,337

Evening group sessions are held at the Clinic on bi-weekly intervals during the fall, winter and spring months. During the past year, 20 such sessions were held, consisting of lectures, films, tapes and discussions on various aspects of alcoholism, and the therapeutic process. These group discussions enable patients to obtain a better understanding of their illness and also promote a feeling of belonging to a group of individuals having a common problem. Attendance at group sessions is voluntary and although the number of patients attending is not large, those that do appear have a better outlook and a higher level of motivation.

This year, a study of the case load at the Halifax Out-Patient Clinic was carried out, based on the first 1,000 registered patients. It is an analysis of these cases with regard to residence, sex, race, age, marital status, religion, ethnic origin, occupation, employment status, educational background, age at first drink, condition at first visit, stage of disease, source of referral, number of visits, group session participation and family participation. This provides a good cross-section of the alcoholic population in this area and by comparison with earlier studies, based on 200 cases and 500 cases, respectively, indicates various trends in the detection and treatment of the disease.

The Executive Director maintains liaison with the Alcoholism Unit of the Nova Scotia Hospital where he serves as a Consultant in Alcoholism. With the assistance of the Welfare Officer, Dr. Snow provides courtesy lectures to the patients at bi-weekly intervals as part of the educational program of the Hospital in its overall treatment approach to the alcoholic patients.

During the year, 25 lectures were given at the Nova Scotia Hospital to a total attendance of 755 persons. Following the lectures, 117 patients had an opportunity for individual interviews with the lecturer in order to obtain advice regarding rehabilitation and follow-up management after discharge from hospital.

In March 1970, a program of monthly visits to the Halifax County Correctional Centre was initiated through the efforts of the John Howard Society. The Welfare Officer, Mrs. O'Sullivan, has visited that institution on 9 occasions and conducted lectures and discussions for a total attendance of 290 inmates. The Clinic Statistics are beginning to show the effectiveness of this program in encouraging a number of individuals to seek clinical help for their alcohol problem following discharge from the Correctional Centre.

LIBRARY

The growth of the Foundation library has continued with the acquisition of new publications on the subject of alcoholism as they become available, along with established periodicals. This material is available, both for staff use and for loan to students and other persons interested.

There has also been a fairly heavy demand for the varied assortment of pamphlets which are available for distribution on request to interested individuals and groups. This material contains information beneficial to patients, their families, specific professional groups and the general public.

During the year 6,896 pieces of literature were distributed from the Halifax office and 669 pieces from the Sydney Branch office, giving a combined total for the year of 7,565.

Films from the Foundation's Library have been widely used throughout the Province by schools, Youth Groups, Local Committees, and the general public. New films are acquired for this purpose, as they become available.

A variety of tapes is also available for use in group sessions and for illustrative purposes in professional training.

SYDNEY BRANCH OFFICE ACTIVITIES

Following approval by the Government of Nova Scotia of the establishment of a Sydney Branch of the Nova Scotia Alcoholism Research Foundation in 1969, and subsequent implementing action by the Foundation, the Supervisor, Mr. Earl D. Ward, assumed responsibilities in Sydney on May 1st. Temporary office facilities were set up in the Board Room of the Provincial Building there until alterations to offices in the building, formerly occupied by the Motor Vehicle Branch, were completed. Operations began on June 15 with the staff consisting of the Supervisor, Mr. Ward; Mrs. Myrtle Burchell, Welfare Officer (part-time) in the area of family counselling, a work in which she had been engaged informally for nearly twenty years; Miss Gail McDougall, Stenographer.

Press and other news media were used to announce the Referral Centre's beginning of operation. Mrs. Burchell left two weeks after the Centre's opening to attend the three weeks Rutgers Summer School of Alcohol Studies, with Courses in Counselling and Alcoholism in Social Relations. Following her return the attendance at the Centre began a steady increase which continued throughout the remainder of the year. On September 21st Mr. Martin Merner, for thirty-five years associated with alcoholism and related problems in the steel industry in this area, was appointed to the staff as Field Representative with particular responsibilities in the field of alcoholism in industry. In October the volume of work had increased to the extent that it was necessary to add Mrs. Helen Lothier to the staff as stenographer (part-time).

TABLE I

Patients Registered to December 31, 1970	121
Family Members Counselled	74

The response to the presence of the Clinic quickly laid down guidelines for the direction the work would take in these beginning months. The number of persons suffering from alcoholism, and family members, seeking help has been much greater than anticipated, with nearly 40% being classed as self-referrals. In the 6½ months of Clinic operation 121 persons and 74 family members have sought help, with a total of 815 patient interviews and 552 family member interviews. Ten of the seventy-four family members have sought counselling, for the alcoholic member not as yet ready to accept help.

Table II shows the sources of referral. Several of the referrals listed as "friends" were also A.A. members. In addition to the fifteen referrals from the Nova Scotia Hospital, there was an equal number who were advised by the Hospital to follow-up at our Centre, and with whom we have been in contact, who have not as yet registered at the Centre. A number of those listed as self-referrals came voluntarily on the suggestion of friend or employer.

TABLE II

Sources of Referrals

Self	48
Family and Friends	19
Nova Scotia Hospital	15
Court and Probation Services	14
Social Agencies	7
Clinic Patients	4
Alcoholics Anonymous	4
Physicians	4
Employers	2
Clergy	2
Labour Unions	2
Total	121

The Supervisor has served as Counsellor to patients and family members in addition to adminstrative duties. Mrs. Burchell has added much patient counselling to her original designated area of Family Counsellor. It has likewise been necessary for Mr. Merner to devote more hours to patient and family members counselling than had been anticipated, but with the major portion of this spent with persons employed in industry. In addition, he has assisted thirty-five persons with specific job and employment problems, nearly half of these whom he has helped enroll in upgrading and Trade School programs.

Excellent in-staff working relationships have been established, and a brief staff conference each morning keeps efforts coordinated.

TABLE III

Clinic Interviews

Patients	815
Patients' Families	552
Miscellaneous	568
Total	1,935

The following gives more specifically the areas of activity:

RELATIONSHIP TO THE ALCOHOLISM UNIT, NOVA SCOTIA HOSPITAL

By November a close working relationship has been established with the Staff of the Alcoholism Unit, with 76 out of 121 patients having had one or more admissions to the Unit. Twenty referrals were made to the Unit. The Unit refers to the Centre patients discharged, and with their knowledge and consent, forwards a summary of progress while in Hospital. Contact with these is made by letter and/or telephone shortly after discharge, and arrangements for follow-up with the person and family members if desired. In the case of persons who come to the Centre who had on admission to the Unit before our opening, we may obtain from the Unit a summary of their treatment stay through their signed approval on the "release of information" forms provided by the Hospital. In addition to such referrals of persons living in the industrial area of Cape Breton, the Hospital is now sending us a number of referrals on persons in outside areas for contact by regular letters with suggested visits to the Centre if the persons happen to be in the Sydney area. Already there are nucleus groups in the areas of Baddeck, Margaree, Ingonish, and Port Hawkesbury. A letter is sent to each person referred by us while he is in Hospital.

REFERRALS TO OTHER IN-PATIENT FACILITIES

Three referrals to Talbot House and five referrals to local general Hospitals, have been made.

ACTIVITIES IN INDUSTRY

With a long background in management-labor relations and leadership in the alcoholism program already instituted in the Sydney Steel Corporation, Mr. Merner has been working with Sydney Steel and several other industries to assist them with employees where alcoholism has become a major problem detrimental to their working efficiency and productivity.

Thirty-five of our 121 registered patients are employed with Sydney Steel Corporation. A working arrangement is being developed with SYSCO, whereby employees facing probable discharge, or already suspended for several months, can continue on their jobs, or be considered for re-instatement, or a year's probationary basis dependent of their regular visits to our Centre, with family members, and consequent sincerely attempted sobriety. With approximately 3,000 persons employed as SYSCO this cooperative effort will mean increasing direct savings to the Provincially owned Corporation. This forward step is being welcomed by both management and union, and may well become a pattern for other industries in the Province.

As the year ended, Defence and Department of Transport establishments were using our counselling and referral facilities in a similar way, and inquiries had been received from a number of other firms and private employers.

COOPERATION WITH ALCOHOLIC ANONYMOUS AND AL-ANON GROUPS

A very large percentage of persons in contact with the Centre here, have had, a relationship, close or casual, with one or more of the ten A. A. groups in the industrial area. All are encouraged to attend A. A. meetings regularly. Those not attending, and persons making a first attempt at sobriety, are introduced to the A. A. program, and personal contacts are sometimes made with one of the many A. A. members who has offered to cooperate in assisting persons wishing to know more of A. A. Wives and other family members receive equal encouragement and help in attending meetings of the six Al-Anon Family Groups in the area. A list is kept of A. A. and Al-Anon meetings on the Island for those desiring it.

The Centre has subscriptions to the A. A. "Grapevine" and Al-Anon "Family Forum" and staff members draw frequently on material in these and other A. A. and Al-Anon publications in their counselling sessions. A wide selection of A. A. and Al-Anon pamphlets is kept on hand to acquaint patients with the A. A. program. Staff members have been in attendance at meetings in most of the areas, and have been invited on several occasions to attend and speak on the work of the Centre in this area and elsewhere on the Island.

COOPERATION WITH THE CAPE BRETON MENTAL HEALTH CENTRE

Over a dozen of our registered patients are being followed as well by the Cape Breton Mental Health Centre in Sydney and its outreach Clinics in adjoining towns. Mutual referrals have been arranged in several instances, with accompanying consultations.

RELATIONSHIP WITH COURT AND PROBATION SERVICES

Fourteen referrals were from Family and Civil Court Judges. Regular counselling follow up with persons and family members thus referred is being carried out in cooperation with probation officers with whom regular consultations are held.

CONTACT WITH SOCIAL AND WELFARE AGENCIES

In addition to direct referrals, a number of Provincial, City, Welfare and Family Service workers and Public Health Nurses have visited the Centre to discuss their own counselling and client management where alcoholism is a major individual and family problem.

RELATIONSHIP TO TALBOT HOUSE

The usually over-crowded facilities of Talbot House, Frenchavle, operated under the supervision of Father John Webb, has not permitted him to accept as many persons from us as needed those "half way house" facilities. Many consultations were held with Father Webb regarding patients mutually referred, as well as discussions on the treatment needs in this area.

EXPANSION OF CLINIC OUTREACH

With the cooperation of Dr. M. F. MacNeil and Dr. L. D. MacCormick of the Department of Public Health, one day Clinics are held twice a month each in the Department of Public Health Offices in Glace Bay and Sydney Mines. Thus far the Supervisor and Family Counsellor have operated these Clinics for appointments with those individual and family members where large families, low incomes, lack of transportation, and/or working hours make it very difficult for them to arrange appointments in Sydney.

PATIENT MAILINGS AND FOLLOW-UP

Appropriate personal letters are sent to the following:

(1) Patients referred by us to the Alcoholism Unit, expressing our interest in their stay, and anticipating a visit to the Centre upon discharge.

(2) Others discharged from the Alcoholism Unit and advised to follow-up with us, are contacted by letter and/or phone, outlining the services offered here and inviting their contact.

(3) Persons and family members in other parts of the Island referred to us by the Alcoholism Unit receive a similar letter, along with appropriate A. A. and other pamphlets of assistance in continuing sobriety and further understanding of the illness, with encouragement to contact the A. A. and Al-Anon in their area, and to come to the Centre if visiting Sydney.

(4) Persons who registered with us in the early weeks and, after attaining a measure of sobriety, dropped off in Clinic attendance, are encouraged to resume at least a monthly contact.

(5) Persons who fail to notify us of a missed appointment are advised of our willingness to work with them toward a continuing sobriety, and invited to phone for a further appointment.

(6) A pre-Christmas letter to all patients and family members, and persons referred to us by the Alcoholism Unit who have not yet begun follow-up here, with holiday wishes along with some suggestions toward holiday sobriety gleaned from A. A. publications.

RESEARCH

A questionnaire sent out to Doctors in this area, known from our patient files to be particularly interested in the alcoholic, brought some valuable information on problems faced by them as they seek to provide in-patient treatment and care. These findings can provide guidelines when the pressing issue of better in-patient facilities in this area is considered.

EDUCATION AND PUBLIC RELATIONS

As our statistics of 1,367 patient and family member interviews indicate, patient and family counselling, referral, and follow-up have of necessity taken the major portion of the Staff's time and energy. The increasing number of new patients in the last three months of the year required a large percentage of weekly sessions, with a corresponding load of recorded progress notes.

Though there has been little time thus far to set up education and public relations formally in the community, the 568 miscellaneous clinic interviews recorded in Table III are indicative of community interest and desire to learn more of alcoholism.

In addition to separate groups of nurses sent us from the local hospitals for talks on alcoholism and the understanding and care of the alcoholic, visits and phone calls for a similar purpose have come from the following: Junior High and High School students, social, welfare, and Family Service workers, probation officers, doctors, public health nurses, clergy, union and management, personnel, employers, members of the news media and A. A. members.

In addition to A. A. and Al-Anon literature, pamphlet material is available for distribution to persons and groups. These pamphlets contain information to persons suffering from alcoholism, family members, and those involved professionally. Six hundred and sixty-nine pieces of literature were distributed over the 6½ months of operation.

OUTLOOK FOR 1971

Persons closely associated with the alcoholism situation in this area feel the Centre has thus far reached only a small proportion of the alcoholism population in need of treatment. This conviction has certain implications for the future of the Centre.

(1) Clarification of the working status of our present staff.

(2) Additional staff members may have to be considered if the present standard of counselling, referral, and follow-up is to be maintained, and needed community outreach made.

(3) The 3½ small offices used by our five staff members, serving as well space for office equipment and a waiting area for patients, is becoming increasingly inadequate and needs immediate attention.

(4) The situation regarding in-patient facilities for short-term treatment and care of the many persons in the acute and/or withdrawal stages of the illness is a matter of concern to doctors, our Centre, and all others involved in care and treatment of the alcoholic.

OTHER OPPORTUNITIES PRESENTED AS THE YEAR ENDED

Requests for regular group sessions at the County Jail; more contact with persons at Talbot House; requests for union and management group sessions in dealing with alcoholism in industry; possible Clinic outreach in New Waterford and contact with persons living in parts of the Island beyond the industrial area.

AFFILIATE ORGANIZATIONS

The Nova Scotia Alcoholism Research Foundation maintains affiliation with other organizations at both the national and international levels. These memberships provide definite benefits to the Provincial program by making information and research findings more readily available and also providing knowledgeability of progress in other areas for programs of education, treatment and rehabilitation of alcoholism.

The Foundation has continued as a participating member in the Canadian Foundation on Alcoholism and Drug Dependency. The Canadian Foundation, with support from a grant from the Federal Department of National Health and Welfare, sponsors a Canadian Conference on Alcoholism annually for delegates from the various Provinces and Territories of Canada. In 1970, the Fifth Annual Conference was held in Halifax, based on a theme of "Alcoholism — Attitudes and Approaches". The Nova Scotia program acted as host for this conference, arranged by a Committee, composed of Dr. C. M. Harlow, Dr. J. M. Snow and Mr. E. T. Fitzpatrick, Co-hosts for the conference were the alcoholism programs of New Brunswick, Newfoundland, and Prince Edward Island, each of which contributed to the conference program. Over one hundred delegates and guests were in attendance, including over twenty delegates from the various Local Committees on Alcoholism throughout the Province of Nova Scotia. During the conference in June, the Annual Meeting of the Canadian Foundation was held, at which, Dr. Harlow was elected President for the coming year. The Program Committee met in Yellowknife, North West Territories, in November 1970, attended by Dr. Harlow and Mr. Fitzpatrick, and arrangements are being made for the 1971 Canadian Conference and Annual Meeting to be held in Toronto next May at which the Nova Scotia Foundation would be represented.

The Nova Scotia Alcoholism Reasearch Foundation also maintains membership in the North American Association of Alcoholism Programs. Although this is a very helpful affiliation, it was not possible, this year, to have a representative from Nova Scotia attend the Annual Meeting which was held in Texas.

PROGRAM EXPANSION

It is anticipated that the Foundation will require some degree of expansion of facilities and staff in both Halifax and Sydney during the coming year. The Foundation, through its Standing Committees, is also considering ways and means by which program expansion could be of direct benefit to other areas of the Province where up until the present, only Local Committees have been established.

The Nova Scotia Foundation has also given consideration to the possibility of expanding its Terms of Reference to encompass the broader field of drug dependency. Although there is a high level of interest in our society concerning problems created by dependence on drugs other than alcohol, it is generally acknowledged by trained individuals that the problem of alcoholism is still the most significant.

The program of the Nova Scotia Alcoholism Research Foundation has been maintained in the fields of Research, Education, Treatment and Rehabilitation and has shown further growth during the past year. It is anticipated that this trend will continue with increased demands, particularly for Education and Treatment Programs.